

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

fe Application

Inventors:

James D. Thornton and Richard R. Burton

Appl. No.: Confirm. No.: 09/740,076

4563 December 19, 2000

Filed: Title:

METHOD AND SYSTEM FOR EXECUTING

BATCH JOBS BY DELEGATING WORK TO

INDEPENDENT SERVICE PROVIDERS

PATENT APPLICATION

Art Unit: 2152

Examiner: Unassigned

Customer No. 23910

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8

I hereby certify that this correspondence is being deposited in the United States Postal Service with sufficient postage Commissioner for Patents, Art Unit 2152, Washington, DC 20231, on May

Larry T. Harris, Reg. No.

(Attorney Signature)

Signature Date: May 2 2001

TRANSMITTAL LETTER

Commissioner for Patents Art Unit 2152 Washington, DC 20231

Sir:

- Transmitted with this communication in connection with the above-identified application are the following:
- A Response under 37 C.F.R. §1.111 to the Office Action dated ____.
- A Response under 37 C.F.R. §1.116 to the Office Action dated ____.
- A Petition for an Extension of Time under 37 C.F.R. §1.136.
- A Statement pursuant to 37 C.F.R. §1.27 to establish small entity status under 37 C.F.R. §1.9(f).
- ✓ An Information Disclosure Statement pursuant to 37 C.F.R. §1.56.

The fee associated with this communication has been calculated as shown below: ✓ No fee is required with this communication. Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established. A fee for extension of time for response under 37 C.F.R. §1.136 filed within _ month(s) after the original time for response of \$___ is due. A fee of \$180.00 is due for the submission of the accompanying Information Disclosure Statement. A fee for addition of claims under 37 C.F.R. §1.16 is due as follows: Claims Rate Remaining Highest Small Entity/ After Previously Other Than Number Paid For Extra **Small Entity** Amendment Total \$ 9.00 \$18.00 \$ Claims -X [20 or more] Independent \$40.00 \$80.00 \$ Claims ___ -[3 or more] X First Presentation of \$135.00 \$ \$270.00 Multiple Dependent Claim(s) = *If the difference is less than zero, enter "0". Additional Fee The total fee required with this communication is \$____ and is to be paid as follows: Please charge Deposit Account No. 24-0037 in the amount of \$___. A duplicate copy of this authorization is enclosed.

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A check in the amount of \$ _ is enclosed.

- ✓ The Commissioner is hereby authorized to charge underpayment of any fees, including the following fees, associated with this communication or credit any overpayment to Deposit Account No. 24-0037. A duplicate copy of this authorization is enclosed.
 - ✓ Any filing fees under 37 C.F.R. §1.16 for the presentation of additional claims.
 - ✓ Any patent application processing fees under 37 C.F.R. §1.17 including any applicable fee for extension of time.

Respectfully submitted,

Date: 5/02/0

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